

CONTRACT DATA REQUIREMENT LIST

Form Approval OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:**D. SYSTEM/ITEM:** SRP 2**B. EXHIBIT:** A**E. CONTRACT/PR NO.:****C. CATEGORY:** TDP**F. CONTRACTOR:****1. DATA ITEM NO.:** A006**2. TITLE OF DATA ITEM:** Test Procedure**3. SUBTITLE:****4. AUTHORITY:** DI-NDTI-80603**5. CONTRACT REFERENCE:****6. REQUIRING OFFICE:** SMC/TEBI**9. DIST. STATEMENT
REQUIRED:** C**12. DATE OF FIRST SUB:** 14DTEST**7. DD250 REQ:** LT**10. FREQUENCY:** ONE/R**13. DATE OF SUBS. SUB:** R/ASR**8. APP CODE:** N/A**11. AS OF DATE:****14. DISTRIBUTION****A. ADDRESSEES****B. COPIES: DRAFT FINAL****Reg****Repro**

SMC/TEBI

1

TRW

1

15. TOTAL:

2

16. REMARKS:**BLOCK 4:** Contractor's format is acceptable.**BLOCKS 14 & 15:** This data will be provided via an electronic media (CD, DVD, e-mail, etc.).**17. PRICE GROUP:****18. ESTIMATED TOTAL PRICE:****G. PREPARED BY:** Michael A. Gallogly**I. APPROVED BY:** Michael A. Gallogly //signed//**H. DATE:****J. DATE:** 9 Aug 00

CONTRACT DATA REQUIREMENT LIST

Form Approval OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:**D. SYSTEM/ITEM:** SRP 2**B. EXHIBIT:** A**E. CONTRACT/PR NO.:****C. CATEGORY:** TDP**F. CONTRACTOR:****1. DATA ITEM NO.:** A009**2. TITLE OF DATA ITEM:** Range Safety Data for Aerodynamic Weapons (RSDAW)**3. SUBTITLE:****4. AUTHORITY:** DI-SAFT-80181**5. CONTRACT REFERENCE:****6. REQUIRING OFFICE:** SMC/TEBI**9. DIST. STATEMENT
REQUIRED:** C**12. DATE OF FIRST SUB:** 12ODLAUNCH**7. DD250 REQ:** LT**10. FREQUENCY:** One/R**13. DATE OF SUBS. SUB:** R/ASR**8. APP CODE:** N/A**11. AS OF DATE:****14. DISTRIBUTION****A. ADDRESSEES****B. COPIES:** DRAFT FINAL

Reg

Repro

SMC/TEBI

1

TRW

1

15. TOTAL:

2

16. REMARKS:**BLOCK 4:** Contractor's format is acceptable.

Delete the following: 10.2.2.1.6, 10.2.2.2.1, 10.2.2.2.2, 10.2.2.2.3, 10.2.2.4.7, 10.2.2.5.2-4, 10.2.2.5.7, 10.2.2.6.3-6, 10.2.2.7.1, 10.2.2.7.2, and 10.2.2.9.

Change 10.2.2.8.4.2 to read as follows: A complete description of the coordinate system(s) used to represent position and velocity shall, for analysis, accompany all trajectories submitted.

BLOCK 13: Submit revisions as required to maintain currency.**BLOCKS 14 & 15:** This data will be provided via an electronic media (CD, DVD, e-mail, etc.).**17. PRICE GROUP:****18. ESTIMATED TOTAL PRICE:****G. PREPARED BY:** Michael A. Gallogly**I. APPROVED BY:** Michael A. Gallogly //signed//**H. DATE:****J. DATE:** 9 Aug 00

CONTRACT DATA REQUIREMENT LIST

Form Approval OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:**D. SYSTEM/ITEM: SRP 2****B. EXHIBIT: A****E. CONTRACT/PR NO.:****C. CATEGORY: TDP****F. CONTRACTOR:****1. DATA ITEM NO.: A011****2. TITLE OF DATA ITEM: Flight Termination System Report (FTSR)****3. SUBTITLE:****4. AUTHORITY: DI-SAFT-80183A****5. CONTRACT REFERENCE:****6. REQUIRING OFFICE: SMC/TEBI****9. DIST. STATEMENT
REQUIRED: C****12. DATE OF FIRST SUB: GA30D****7. DD250 REQ: LT****10. FREQUENCY: ONE/R****13. DATE OF SUBS. SUB: R/ASR****8. APP CODE: A****11. AS OF DATE:****14. DISTRIBUTION****A.****ADDRESSEES****B. COPIES:****DRAFT****FINAL****Reg****Repro**

SMC/TEBI

1

1

TRW

1

1

15. TOTAL:

2

2

16. REMARKS:**BLOCK 4:** Contractor's format is acceptable.

BLOCKS 8 and 13: Submit for approval 30 days prior to IDR 3. Government approval/disapproval shall be given 15 days after IDR 3. Final documents shall be delivered 30 days after Government approval. Submit revisions as required to maintain currency.

BLOCKS 14 & 15: This data will be provided via an electronic media (CD, DVD, e-mail, etc.).

17. PRICE GROUP:**18. ESTIMATED TOTAL PRICE:****G. PREPARED BY:** Michael A. Gallogly**I. APPROVED BY:** Michael A. Gallogly //signed//**H. DATE:****J. DATE:** 9 Aug 00

CONTRACT DATA REQUIREMENT LIST

Form Approval OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:**D. SYSTEM/ITEM: SRP 2****B. EXHIBIT: A****E. CONTRACT/PR NO.:****C. CATEGORY: TDP****F. CONTRACTOR:****1. DATA ITEM NO.: A012****2. TITLE OF DATA ITEM: Mishap Risk Assessment Report (MRAR)****3. SUBTITLE: Accident or Critical Mishap Reporting****4. AUTHORITY: DI-SAFT-81300****5. CONTRACT REFERENCE:****6. REQUIRING OFFICE: SMC/TEBI****9. DIST. STATEMENT****12. DATE OF FIRST SUB: See 16****REQUIRED: C****7. DD250 REQ: LT****10. FREQUENCY: ASREQ****13. DATE OF SUBS. SUB: See 16****8. APP CODE: N/A****11. AS OF DATE:****14. DISTRIBUTION****A.****ADDRESSEES****B. COPIES: DRAFT****FINAL****Reg****Repro**

SMC/TEBI

1

TRW

1

15.TOTAL:

2

16. REMARKS:**BLOCK 4:** Contractor's format is acceptable.

Delete all paragraphs except 10.2.12.

Add to paragraph 10.2.12: Report any mishap or accident to the Government Program Office within 24 hours if mishap involves serious personnel injury or hardware loss in excess of \$100K.

BLOCKS 10,12 & 13: Submit MRAR as appropriate per paragraph 10.2.12.

Notify Government Program Office only of any mishap or accident within 24 hours, if mishap involves serious personnel injury or hardware loss in excess of \$100K. Submit written report of incident/accident to Government Program Office only within 7 working days of incident/accident.

BLOCKS 14 & 15: This data will be provided via an electronic media (CD, DVD, e-mail, etc.).**17. PRICE GROUP:****18. ESTIMATED TOTAL PRICE :****G. PREPARED BY:** Michael A. Gallogly**I. APPROVED BY:** Michael A. Gallogly //signed//**H. DATE:****J. DATE:** 9 Aug 00

CONTRACT DATA REQUIREMENT LIST**Form Approval OMB No. 0704-0188**

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:**D. SYSTEM/ITEM: SRP 2****B. EXHIBIT: A****E. CONTRACT/PR NO.:****C. CATEGORY: TDP****F. CONTRACTOR:****1. DATA ITEM NO.: A016****2. TITLE OF DATA ITEM: Interface Control Drawing Documentation****3. SUBTITLE:****4. AUTHORITY: DI-CMAN-81248****5. CONTRACT REFERENCE:****6. REQUIRING OFFICE: SMC/TEBI****9. DIST. STATEMENT****12. DATE OF FIRST SUB: GA30D****REQUIRED: C****7. DD250 REQ: LT****10. FREQUENCY: ONE/R****13. DATE OF SUBS. SUB: R/ASR****8. APP CODE: A****11. AS OF DATE:****14. DISTRIBUTION****A.****ADDRESSEES****B. COPIES:****DRAFT****FINAL****Reg****Repro**

SMC/TEBI

1

1

TRW

1

1

Each Experimenter

1

1

15.TOTAL:

3

3

16. REMARKS:**BLOCK 4:** Contractor's format is acceptable.

Add paragraph 10.4:

Provide an ICD for each experiment or payload.

Detail Description and Drawings of ignition circuit, with emphasis with safety interlocks.

BLOCKS 8: Submit drafts at IDR 2.**BLOCKS 14 & 15:** This data will be provided via an electronic media (CD, DVD, e-mail, etc.).**17. PRICE GROUP:****18. ESTIMATED TOTAL PRICE :****G. PREPARED BY:** Michael A. Gallogly**I. APPROVED BY:** Michael A. Gallogly //signed//**H. DATE:****J. DATE:** 9 Aug 00

CONTRACT DATA REQUIREMENT LIST

Form Approval OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. Please DO NOT RETURN your form to either these addresses. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

A. CONTRACT LINE ITEM NO.:
B. EXHIBIT: A
C. CATEGORY: TDP
D. SYSTEM/ITEM: SRP 2
E. CONTRACT/PR NO.:
F. CONTRACTOR:

1. DATA ITEM NO.: A021
2. TITLE OF DATA ITEM: Computer Software Product End Items
3. SUBTITLE:

4. AUTHORITY: DI-MCCR-80700

5. CONTRACT REFERENCE:

6. REQUIRING OFFICE: SMC/TEBI

**9. DIST. STATEMENT
REQUIRED: C**

12. DATE OF FIRST SUB: 30DIDR3

7. DD250 REQ: LT

10. FREQUENCY: ONE/R

13. DATE OF SUBS. SUB: R/ASR

8. APP CODE: N/A

11. AS OF DATE:

14. DISTRIBUTION A. ADDRESSEES

B. COPIES: DRAFT FINAL

SMC/TEBI
TRW

Reg	Repro
1	1
1	1
2	2

15.TOTAL:

16. REMARKS:

BLOCK 4: Contractor's format is acceptable.


Add paragraph 9: This report shall include the flight software source code for verification and validation by the government or its representative.

BLOCK 13: At least five changes to the basic software program shall be considered a revision to the basic flight software code.

BLOCK 14: Recipients shall receive a hardcopy and an electronic copy of the original. Media shall be Zip Drive, CD ROM, or DVD Disk. Revisions shall be electronically submitted. Program Office is to receive a Letter of Transmittal Only.

17. PRICE GROUP:

18. ESTIMATED TOTAL PRICE :

G. PREPARED BY: Michael A. Gallogly 

I. APPROVED BY: Michael A. Gallogly //signed//

H. DATE:

J. DATE: 9 Aug 00 